

AMENDMENT TO DIVISION F OF RULES
COMMITTEE PRINT 116-60
OFFERED BY MRS. WATSON COLEMAN OF NEW
JERSEY

At the end of division F (before the short title), insert the following:

1 SEC. _____. (a) None of the funds made available by
2 this Act pursuant to the fourth proviso in “Centers for
3 Disease Control and Prevention—CDC-wide activities and
4 program support” may be expended until the study re-
5 quired by subsection (c) has commenced.

6 (b) The coronavirus pandemic has revealed signifi-
7 cant structural challenges that our public health infra-
8 structure faces in gathering and reporting demographic
9 data for researchers, practitioners, and policy makers to
10 make timely and informed public health decisions and—

11 (1) preliminary public health data from the
12 CDC indicated that communities of color have been
13 disproportionately negatively affected by COVID-19;
14 for example, 60 percent of hospitalizations were
15 among communities of color;

16 (2) preliminary public health data
17 disaggregated by race showed—

1 (A) Black and Latino American deaths
2 from COVID-19 were nearly two times greater
3 than would be expected based on their share of
4 the population nationwide;

5 (B) in some States, Black Americans had
6 COVID-19 death rates three or more times
7 greater than their White Americans;

8 (C) Black and Latino Americans have been
9 three times more likely to contract COVID-19
10 than White Americans nationwide, with the rate
11 being higher in some States and localities;

12 (D) Asian Americans contracted COVID-
13 19 at slightly higher rates than White Ameri-
14 cans nationwide, and had a case fatality rate
15 that is disproportionately higher than the gen-
16 eral population in certain areas;

17 (E) limited data for Asian Americans
18 disaggregated by ethnicity in some States and
19 localities showed certain subgroups had dras-
20 tically higher case and death rates than the
21 general population;

22 (F) in Hawaii, Native Hawaiians ac-
23 counted for nearly 20 percent of COVID cases
24 even though they make up only 10 percent of
25 the population and in California, the case rate

1 for Native Hawaiians and Pacific Islanders was
2 1.3 percent even though they only account for
3 0.3 percent of the population; [and]

4 (G) indigenous communities have been dev-
5 astated by the COVID-19 pandemic—

6 (i) at one point, the Navajo nation
7 had the third-highest per capita rate of
8 COVID-19 in the country, after New Jer-
9 sey and New York; and

10 (ii) in one State, while Native Ameri-
11 cans represented more than half of cases
12 at one point while only representing 10
13 percent of the population;

14 (3) at one point, more than half of all COVID-
15 19 cases reported, and nearly 10 percent of deaths
16 reported to the CDC were not assigned a race; and

17 (4) on July 10, 2020, the Department of
18 Health and Human Services announced that hos-
19 pitals would be required to report COVID-19 data
20 directly to an HHS portal instead of to the CDC.

21 (c) The Comptroller General of the United States
22 shall carry out a study evaluating—

23 (1) whether COVID-19 reporting entities, de-
24 fined as Federal, State, and local health agencies,
25 hospitals, testing sites, and other institutions report-

1 ing COVID–19 rates and deaths to the Department
2 of Health and Human Services, including the Center
3 for Disease Control and Prevention, are aware of
4 their legal responsibilities to collect, analyze, and re-
5 port demographic data;

6 (2) whether COVID–19 reporting entities have
7 necessary technical systems in place to facilitate ease
8 of data collection, analysis, and reporting;

9 (3) whether COVID–19 reporting entities ade-
10 quately train staff to fully and accurately collect,
11 analyze and report demographic data in line with
12 Federal standards;

13 (4) whether COVID–19 reporting entities at-
14 tempting to provide demographic data face other
15 barriers to collection, analysis and reporting of that
16 data, including at State, local, Tribal, and territorial
17 levels, and when working with subgroup data beyond
18 major aggregate groups;

19 (5) the consistency with which COVID–19 re-
20 porting entities are reporting demographic data by
21 race and ethnicity, and by subgroups within aggre-
22 gate data; and

23 (6) whether the change in HHS policy for hos-
24 pitals reporting COVID–19 data compromised the

1 integrity of data collected, analyzed and reported by
2 COVID–19 reporting entities.

3 (d) In carrying out the study required under sub-
4 section (c), the Comptroller General shall solicit feedback
5 and perspectives to the extent practicable from COVID–
6 19 reporting entities, diverse advocacy organizations, re-
7 search organizations, and any other organization or entity
8 that the Comptroller General determines appropriate.

9 (e) The Comptroller General shall issue one or more
10 reports to the Congress containing the results of the study
11 required under subsection (c). The first report shall be
12 issued not later than the end of the 15-month period be-
13 ginning on the date of the enactment of this Act. The re-
14 ports shall contain—

15 (1) all findings and determinations made in car-
16 rying out the study required under subsection (c);
17 and

18 (2) recommendations for any legislative or regu-
19 latory changes to address impediments in public
20 health entities reporting demographic data.

